

TELEFAX COVER SHEET

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TO: Commissioner of Patents

FAX NO.: 703-872-9314

FROM: EAMON J. WALL

DATE: 4/28/03

MATTER: Serial No. 09/273,948 Filed: 3/22/99

DOCKET NO.: Golestani 2

APPLICANT: Golestani

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

☐ Petition
☐ Disclosure Statement & PTO-1449
☐ Priority Document
☐ Drawings (1 sheet) - change encircled
☒ Response Under 37 CFR 1.111

☒ Transmittal letter (2 copies)
☐ Fee Transmittal (2 copies)
☒ Deposit Account Transaction
☒ Facsimile Transmission Certificate
dated 4/28/03

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/273,948	
	Filing Date	3/22/99	
	First Named Inventor	Golestani	
	Group Art Unit	2662	
	Examiner Name	Anh-Vu H Ly	
Total Number of Pages in This Submission	17	Attorney Docket Number	LCNT/Golestani 2

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		The Commissioner is authorized to charge the \$930 extension fee and any other fees due (including but not limited to any extension fees pursuant to 37 C.F.R. 1.136(a)) to Deposit Account No. 20-0782. A duplicate copy of this transmittal is attached.
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Eamon J. Wall, Reg. No. 39,414	
Signature	<i>E J Wall</i>	
Date	4/28/03	